

**Tickets Provided by
Agency Report**

A Public Document

TICKETS PROVIDED BY
AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
City of Imperial Beach			
Division, Department, or Region (if applicable)		RECEIVED 2009 JUN 10 A 9:34 CITY MANAGER/PERSONNEL CITY CLERK OFFICES	
Street Address			
825 Imperial Beach Blvd. Imperial Beach, CA 91932			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
(619) 423-8301	ibccclerk@cityofib.org		
Agency Contact (name and title)			
Jacqueline M. Hald, City Clerk			

2. Event For Which Tickets Were Distributed

Date(s) of Event: ____/____/____ Description of Event: Gen. Admission Ticket expires 6/28/09
____/____/____ Face Value of Ticket: \$ 53.99

Agency Event ☐ Yes ☒ No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Six Flags Magic Mountain

Number of Tickets Received: 1 Ticket(s) Provided to Agency: ☒ Gratuitously ☐ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Moeller, Alan	1	5.3 (j) City employee drawing.

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: City of Imperial Beach

Name of Individual or Organization: Erika Ceja Number of Tickets: 1


Description of Organization: Local Government

Address of Organization: 825 Imperial Beach Blvd., Imperial Beach, CA 91932
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
5.3 (h) Attracting and retaining highly qualified employees in City Service.

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	Gary Brown	City Manager	6/10/2009
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)